

Examining Africans' kidney disease

March 11 2015

World Kidney Day, celebrated on 12 March 2015, is commemorated to raise awareness of the importance of our kidneys to our overall health and to reduce the frequency and impact of kidney disease and its associated health problems worldwide.

Wits renal specialist, Professor Saraladevi Naicker, will attend the World Congress of Nephrology in Cape Town from 13 to 17 March 2015 co-hosted by the South African Renal Society, of which she is the President.

Held in collaboration with the International Society of Nephrology, it is the first time that this prestigious meeting is held in Africa. Speakers will include Archbishop Emeritus Desmond Tutu and the Minister of Health, Dr Aaron Motsoaledi, and local, national and international renal and nephrology experts.

Examining the key to Africans' kidney disease

"I got this on the street somewhere in Uganda, during an educational visit for the International Society of Nephrology," says Professor Saraladevi Naicker, pointing to a hand-painted map of Africa on the wall.

Naicker, a kidney specialist, is a clinician, teacher, researcher and administrator who has been accused of being a workaholic, because of the hours she works. "People think I'm a workaholic, but there's a difference between that and having a strong work ethic," she says. "The only time I am comfortable saying no to work is when I physically can't

do it. And I want to do things to help other people progress."

Naicker recently stepped down as head of Nephrology and Internal Medicine at the Charlotte Maxeke Johannesburg Academic Hospital and Wits, to focus more on research and her role as chair of the Graduate Studies Committee in the Wits School of Clinical Medicine.

She has a passion for medical education and has been instrumental in setting up training programmes for African graduates. One afternoon per week, Naicker trains younger medical staff and sees patients at the Donald Gordon Medical Centre. She also visits the Mafikeng Renal Unit in the North West Province once a month for a couple of days, and she supervises the research projects of 25 MMed, MSc and Ph.D students.

But whether in the clinic or behind a desk, her area of expertise covers kidney disease, [kidney failure](#), dialysis and kidney transplants, as well as the spectrum of internal medicine.

"Kidney disease can be highly lethal, and it is one of the major complications of HIV," says Naicker. Even so, some people with HIV never develop kidney disease, and she is determined to find out why.

Her investigations into different populations have so far revealed an interesting gene mutation that seems to be associated with increased susceptibility to HIV-related kidney disease.

"The mutation occurred in West Africa, where it originally allowed people to survive sleeping sickness. These populations were transported as slaves to the US, and they also migrated elsewhere," says Naicker.

"But when HIV came around, that same mutation made people more vulnerable to kidney disease than those without the mutation."

Interestingly, Ethiopians and other populations who do not have the [gene mutation](#) do not seem to develop this form of lethal kidney disease when they become infected with HIV.

Naicker and her collaborators don't have the full picture yet, and part of the answer could lie in whether the same genetic factors play a role in kidney disease unrelated to HIV.

"Africans are three to four times more likely to develop kidney disease than the rest of the world's populations," explains Naicker. "We want to know why the prevalence is so much higher in black people, and we think genetics might play a big role."

Other aspects of Naicker's research involves establishing the best strategies to manage kidney disease in local and global contexts, finding out why some people respond better to treatment than others, and looking at the role of ARVs in treating HIV-related kidney disease.

"One of the most positive findings recently, and one I'm quite excited about, is that deaths from [kidney disease](#) have come down significantly since the roll-out of ARVs," she concludes.

Provided by Wits University

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